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APPLICATION FOR CERTIFICAT	TE I
OF AUTHORITY FOR FOREIGI	V 09.007 o
LIMITED LIABILITY COMPANY	09 0CT 25 AM 9:0
(Instructions on back of application)	
1. The name of the limited liability company is:	STATE OF IDAHO
JPS Group, LLC	
2. If the name of the limited liability company is not permissib name the foreign limited liability company will use in Idaho	
 The jurisdiction under whose laws the limited liability comp The name and complete street address of the registered a 	
	Coeur d'Alene, ID 83814
Janet F. King 219 E. CDA Lake Dr.,	
5. The street and mailing address of the limited liability comp	oany's principal office is:
219 E. CDA Lake Dr., Coeur d'Alene, ID 83814	
Street Address	
Malling Address, if different	
6. The street and mailing address of the limited liability comp under whose laws it is organized is:	any's office in the jurisdiction
1620 Central Ave. Ste 202, Cheyenne, WY 82001	
Street Address	
Meiling Address, if different	
7. The name and mailing address of at least one member or	manager:
Janet F. King 219 E. CDA Lake Dr.	, Coeur d'Alene, ID 83814
8. The mailing address for future correspondence:	
219 E. CDA Lake Dr., Coeur d'Alene, ID 83814	
9. Signature of an authorized person:	Secretary of State use only
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Arthorized Signature	
Amporized Signature	
9. Signature of an authorized person:	tdown secretary of state
	10/26/2009 05:00
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STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

JPS Group, LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on August 18, 2003, comply with all applicable requirements of this office. Its period of duration expires 08/18/2033. This entity has been assigned entity identification number 2003-000453739.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 23rd day of October, 2009 at 11:00 AM. This certificate is assigned 006290019.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.